FORM

NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION BUSINESS TAX SUMMARY

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For the CALEND	AR year 1995 or other tax year beg	inning Mo Day Year	and ending Mo	Day Year					
	PROPRIETORSHIP - LAST NAME	FIRST NAME & INITIAL		SOCIAL SECURITY NU	MBER				
STEP 1	PROPRIETORSHIP - SPOUSE'S LAST NAME	FIRST NAME & INITIAL							
Place LABEL HERE				SPOUSE'S SOCIAL SEC	CURITY NUMBER				
Otherwise Please Print	CORPORATE, PARTNERSHIP FIDUCIARY OR	NON-PROFIT NAME							
or Type	NUMBER AND STREET ADDRESS			FEDERAL IDENTIFICATION NUMBER					
. •				PRINCIPAL BUSINESS ACTIVITY CODE [Follow Federal Instructions]					
	CITY OR TOWN, STATE AND ZIP CODE				SPOUSE'S PRINCIPAL BUSINESS ACTIVITY CODE (FOR PROPRIETORSHIP)				
	For next year, instead of receiving a Business Tax give to your preparer? If yes, check here	e just a mailing label to	,						
STEP 2		RTNERSHIP	TO PROPRIETORSHIP	☐ AMENDI	ED RETURN				
Return Type, Federal	, -		FIDUCIARY	☐ FINAL R	ETURN				
Information and Filing	Check here if the IRS has made been previously reported to NH.				e tax return which has no s under a separate cover				
Requirement	DO YOU MEET THE FILING REQUIRE	MENTS FOR: (SEE INS	TRUCTIONS) BET:	YesNo B	PT: YesNo				
STEP 3	PLEASE COMPLETE THE	BET AND/OR BPT RET	URN(S) AND THEN BUS	INESS TAX SUMMA	RY.				
STEP 4	1 (a) Business Enterprise Tax Net of	Statutory Credits	1 (a)						
Figure Your Balance	(b) Business Profits Tax Net of Sta	tutory Credits	1 (b)	1					
Due or	2 PAYMENTS:								
Overpayment	(a) Tax paid with application for ex	2(a)							
	(b) Payments from 1995 estimated	taxes	2 (b)						
	(c) Payments carried over from pri	or year	2 (c)						
	(d) Payments with original return (Amended returns only)	2 (d)	2					
	3 TAX DUE (Line 1 less line 2)			3					
	4 ADDITIONS TO TAX:								
	(a) Interest (See instructions)		4(a)						
	(b) Failure to Pay (See instructions)	'4 (b)						
	(c) Failure to File (See instructions)	4(c)						
	(d) Underpayment of Estimated Tax	(See instructions)							
	Attach Form DP 2210/2220		4 (d)	4					
	5 BALANCE DUE (Line 3 plus line If less than \$1 do not pay, but s Make check payable to: State o	still file the return.		5					
	6 OVERPAYMENT								
	(Line 2 less line 1, adjusted by		6						
	7 Apply overpayment amount of li	• •	•	7 (a)					
	(b) Refund - Please allow 12 weeks for processing 7(b)								
	THIS RETURN MUST BE ACCOMPAN SCHEDULES.	NIED BY COMPLETE AN	ID LEGIBLE COPIES OF	THE APPROPRIATE	FEDERAL FORMS AND				
STEP 5	Under penalties of perjury, I declare	that I have examined th	is summary and the attac	ched returns, and to	the best of my belief they				
Signature(s)	are true, correct and complete. If pre	pared by a person other	r than the taxpayer, this	declaration is based	on all information of				
C.g(-)	which the preparer has knowledge. If group described in this return.	f a combined group, I a	lso certify that all affiliate	ed companies are in	auded in the appropriate				
	group described in this return.								
•									
	Signature	<u> </u>	Signature of Paid Pre	parer Other Than Taxpay	/ef				
	TheI D.A.								
	Title and Date		Preparer's Identificati	ion Number	Date				
	Spouse's Signature and Date (PROPRIETO		Preparer's Address						
	MAIL TO: P.O. BOX 637		Chu - T- Cul	nd Zin Code	·				
	CONCORD, N	IH 03302-0637	City or Town, State a	ing sup Code	BT-SUMMARY				

FORM

NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION BUSINESS ENTERPRISE TAX RETURN FOR CORPORATIONS, COMBINED GROUPS, PARTNERSHIPS, FIDUCIARIES AND NON-PROFIT ORGANIZATIONS

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For the CALENDAR year 1995 or other tax year beginning				, and ending		<u> </u>	1		
, and o, and a second of the s	Mo	Day	Year		Mo	Day	Year		
YOU ARE REQUIRED TO FILE THIS FO	RM	IF G	ROSS	RECEIPTS	WER	E GR	EATER	THAN \$1	00,000
		(Ж						

THE ENTERPRISE VALUE TAX BASE WAS GREATER THAN \$50,000.

STEP 1 Please Print or Type Name	CORPORATE, PARTNERSHIP, FIDUCIARY, PRINC NON-PROFIT NAME	FEDERAL IDENTIFICATION NUMBER	
tax, a net inco state, then the	is activities are conducted both within and without me tax, a franchise tax based upon net income or business enterprise must apportion its enterprise be values for lines 1, 2 and 3. If you need Form E 3) 271-2192.	a capital stock tax in another state, wheth value tax base. Complete Form BET-80,	ner or not it is actually imposed by the other, or Form BET-80-WE for combined groups
STEP 2 Compute	1 Dividends Paid	1	_
the Enterprise Value Tax Base.	2 Compensation and Wages Paid or Accrued	2	
·	3 Interest Paid or Accrued	3	
	4 Enterprise Value Tax Base (Sum of lines 1, 2 and 3)		4
STEP 3 Figure Your Tax	5 NH Business Enterprise Tax (Line 4 x .0025)		5
	6 Statutory Credits: (a) RSA 162-L:8, Community Development Finance Authority Credit (See instructions)		
	(b) Transition Credit (See instructions)	6(b)	6
	7 Business Enterprise Tax Net of Statutory Credits (Line 5 less line 6. IF NEGATIVE, ENTER 0.)		7

ENTER THE AMOUNT FROM LINE 7 ON LINE 1(a) OF THE BUSINESS TAX SUMMARY FORM.

IF YOU HAVE COMPLETED THIS RETURN IT MUST BE FILED WITH THE BT-SUMMARY.

FORM NH-1065

NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION PARTNERSHIP BUSINESS PROFITS TAX RETURN

SEQUENCE #4

For the CALENDAR year 1995 or other tax year beginning _____ and ending _____ and ending _____ and ______

Due date for CALENDAR year filers is on or before April 16, 1996 or the 15th day of the 4th month after the close of the fiscal period.

YOU ARE REQUIRED TO FILE THIS FORM IF GROSS RECEIPTS WERE GREATER THAN \$50,000. FEDERAL IDENTIFICATION NUMBER NAME OF PARTNERSHIP STEP 1 Please Print or 1 INCOME AND DEDUCTIONS (See instructions) STEP 2 Figure Your Tax (b) Net income or (loss) from rental real estate activities 1(b) (c) Net income or (loss) from other rental activities......1(c) (e) Guaranteed payments to partners 1(e) (f) Other income or (loss) from partnership activities not included in (g) Partnership expenses on Federal Form 1065, Schedule K, lines 8-111(g) 2 NET GAIN OR (LOSS) FROM SALE OF ASSETS (See instructions) Attach schedule if additional space is needed. **Description of Property** (a) _ 3 INSTALLMENT GAIN OR (LOSS) Attach schedule if additional space is needed. Gain (Loss) **Description of Property** Date of Original Sale Мо Dav Year (a) 8 NH ADDITIONS AND DEDUCTIONS (See instructions) (d) Interest on US obligations8(d) (e) Wage adjustment required by IRC Section 280C8(e) (f) Income exempt under federal constitutional laws net of related expenses 8(f) (g) Distribution from a joint venture or second partnership......8(g) (h) Add the amount of increase in the basis of assets which was due to the (i) Interest and dividends subject to tax under RSA 77...... 8(i) (k) Add back return of capital received from a Qualifying Venture Capital Fund...8(k) (I) Other additions and deductions required by RSA 77-A:4 (Attach schedule) ... 8(I) 9 Adjusted Gross Business Profits [Line 7 adjusted by line 8(m). If negative, show in brackets.]9 12 New Hampshire Business ProfitsTax (Line 11 x 7%)12 STEP 3 Figure Your Credits 16 Business Enterprise Tax Credit to be applied against Business Profits Tax 17 NH Business Profits Tax Net of Statutory Credits (Line 14 less line 16. IF NEGATIVE, ENTER 0.)17